SEC 1972 (6-02) Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

PROCESSED MAR 18 2004 MAR 18 2004

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Simtrainer, LLC Non-Voting Membership Units							
Filing Under (Check box(es) that Apply): [X] Rule 504 [] Rule 505 [] Rule 506 [] Section	4(6) []ULOE						
Type of Filing: [X] New Filing [] Amendment							
A. BASIC IDENTIFICATION DATA							
Enter the information requested about the issuer							
Name of Issuer ([] check if this is an amendment and name has changed, and indicate Simtrainer, LLC	e change.)						
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
2031 Dryden Road, Moraine, Ohio 45439	(937) 293-3914						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)						
Brief Description of Business law enforcement education and training facility/indoor firing range							



Typ	pe of Business Organization							
[] corporation	[] limited partnership, alre	eady formed	!	[X] other (plea	ise specify):	
[] business trust	[] limited partnership, to be formed			limited liability co.		
				Month	Year			
Act	ual or Estimated Date of Inc	or	poration or Organization:	[1]2]	[0]3]	[X] Actual	[] Estimated	
Jur	isdiction of Incorporation or	Or	ganization: (Enter two-lette CN for Canada; FN				or State: { O] [H]	
41.141.14		** * * * * *						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, and changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% of more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- · Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [>	(] Beneficial Owner	[] Executive Officer	[] Director [)	X] General and/or Managing Partner
Full Name (Last name Pedro, Jeffrey	•				
Business or Residence 2338 Bending	e Address (Number and Willow Drive, Ketterin	•	ate, Zip Code)		
Check Box(es) that Apply:	[] Promoter [>	(] Beneficial Owner	[] Executive Officer	[] Director [)	K] General and/or Managing Partner
Full Name (Last name Balaj, Charles			***********	· · · · · · · · · · · · · · · · · · ·	
Business or Residence 126 Thruston	e Address (Number and Blvd. E., Dayton, Ohio	•	ate, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	first, if individual)				
Business or Residence	Address (Number and	d Street, City, St	ate, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	first, if individual)				
Business or Residence	Address (Number and	d Street, City, St	ate, Zip Code)		
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name	first, if individual)				
Business or Residence	Address (Number and	l Street, City, St	ate, Zip Code)		
		7 NO 10 OF THE OWN OF THE OWN OWN			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this Yes No offering?..... [X] [] Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?..... \$ 5,000 3. Does the offering permit joint ownership of a single unit?..... Yes No [] [X] 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States [ID] [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [INI] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [NVI **IOR**1 INDI [PA] [MT] [NE] [NH] [NJ] [MM] [NY] [NC] [OH] [OK] [RI] [SC] [SD] [TN] [XT] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)] All States [AL] [AK] [AZI [AR] [CA] [[00] [TD] [DE] [DC] (FL) [GA] [HI] [IDI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV][WI] [WY] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers [] All States (Check "All States" or check individual States) [AL] [AK] [AR] [CA] [DC] [GA] [AZ] [CO] [CT] [DE] [FL] [HI] [ID] [ME]

B. INFORMATION ABOUT OFFERING

[NY]

[VT]

[MD]

[NC]

[VA]

[MA]

[ND]

[WA]

[MI]

[OH]

[WV]

[MN]

ΙΟΚΊ

[WI]

[MS]

[OR]

[WY]

[MO]

[PA]

[PR]

[IL]

[TM]

[RI]

[IN]

INE1

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[IA]

[NV]

[SD]

[KS]

[HI]

[TN]

[KY]

[NJ]

[TX]

[LA]

[MM]

[UT]

C.	OFFERING PRICE.	NUMBER C	OF INVESTORS.	EXPENSES	AND USE C	F PROCEEDS
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1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in The columns below the amounts of the securities offered for exchange and already exchanged.

	Aggregate	Amount Aiready
Type of Security	Offering Price	Sold
Debt	\$	\$
Equity	\$	\$
[] Common [] Preferred		· —
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify <u>LLC non-voting membership units</u>).	\$ 85,000	\$ 85,000
Total	\$ 85,000	\$ 85,000

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".

	 1 a · *	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only)		1 11 12	\$ <u>10,000</u> \$ <u>75,000</u> \$ <u>85,000</u>

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	[]\$	0
Printing and Engraving Costs	[]\$_	0
Legal Fees	[X]\$	7,500
Accounting Fees	[]\$ _	0
Engineering Fees	[]\$	0
Sales Commissions (specify finders' fees separately)	[]\$ <u> </u>	0
Other Expenses (identify)	[]\$_	0
Total	[X]\$_	7,500

\$ 77,500

Dollar Amount

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors & Payments Affiliates To Others Salaries and fees [] \$ _____ []\$_____ Purchase of real estate [] \$ _____ []\$_____ Purchase, rental or leasing and installation of Machinery and equipment [] \$ _____ [X]\$<u>35,000</u> Construction or leasing of plant buildings and facilities [] \$______ [X]\$<u>8,600</u> Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) [] \$ _____ []\$_____ Repayment of indebtedness [] \$ _____ []\$____ Working capital [] \$ _____ [X]\$ <u>20,000</u> Other (specify): insurance/advertising [] \$ _____ [X]\$ <u>13,900</u> Column Totals [] \$ ______ [X]\$<u>77,500</u> [X] \$<u>77,5</u>00 Total Payments Listed (column totals added) D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes and undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
Simtrainer, LLC	Cla BS.	3-12-04
Name of Signer (Print or Type	Title of Signer (Print or Type)	
Charles A. Balaj	Manager	

ATTENTION	
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18	_
U.S.C. 1001.)	